

CITY OF FAIRFAX

Community Development and Planning 10455 Armstrong Street, Room 207A Fairfax, VA 22030

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RESIDENTIAL USE PERMIT APPLICATION - DOG

CITY CODE REQUIREMENT Kennel means any place in or at which dogs are kept under one or more of the following conditions: (1) 1 to 2 DOGS No minimum lot size requirement 3 dogs 7,500 square feet minimum lot size 4 dogs 12,500 square feet minimum lot size (2) Any number of dogs that are kept for the purpose of sale or in connection with the boarding, care, training, breeding, or selling, for which any fee is charged. (3) In no case shall more than four dogs be kept on any residential lot in the city. (4) Notwithstanding the foregoing, a place in a residential zoning district in which greater numbers of dogs are kept shall not be deemed to be a kennel if the city issued dog licenses for such dogs on or before October 12, 1999, to the owner or tenant of the property where such dogs are kept. APPLICATION FEES The Zoning fee is collected only if the applicant has never registered a dog at this current address. No Zoning fee is collected if this is a renewal of an existing dog license or other dogs have been registered by the applicant for this current address. Payment of this review fee does not guarantee permit approval. Zoning Review Fee: \$55.00

RESIDENTIAL INFORMATION REQUIRED 1) Street Address of the Residence: 2) Total Square footage of the Lot _____sf 3) Total number of dogs currently at this address (do not include the dog you are applying for) 4) Total number of dogs you are applying for today ____ ______ Is this (circle one): NEW / RENEWAL 5) Total number of dogs that will be at this address (include the dog(s) applied for today) APPLICANT INFORMATION Applicant's Name: Mr./Ms. _ PRINT NAME Applicants Signature (REQUIRED) ____ OFFICE USE ONLY _____Receipt No: ______Fee Amount Paid ___ Tax Map Number: ___ Zone (Check One): R-1_____R-2_____R-3____PD_____RT____RM___ OTHER ZONING OFFICE APPROVAL SIGNATURE This Application is **DENIED** By ____ _ Date ___ Zoning Official This Application is APPROVED By _ Date _____